

**LEGISLATIVE SERVICES AGENCY
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FISCAL IMPACT STATEMENT

LS 6892

BILL NUMBER: HB 1437

NOTE PREPARED: Apr 3, 2003

BILL AMENDED: Apr 3, 2003

SUBJECT: Health Professions Bureau.

FIRST AUTHOR: Rep. Welch

FIRST SPONSOR: Sen. Riegsecker

BILL STATUS: CR Adopted - 2nd House

FUNDS AFFECTED: X **GENERAL**
DEDICATED
FEDERAL

IMPACT: State

Summary of Legislation: (Amended) This bill exempts the Health Professions Bureau from paying a fee to obtain a limited criminal history record when investigating the background of a license applicant. It authorizes a health professions board to order a practitioner to submit to a physical or mental examination at the practitioner's expense and to require a practitioner to pay the administrative law judge costs in a disciplinary hearing.

The bill adds an advanced practice nurse to the Indiana State Board of Nursing (Board) and makes other changes to make up of the Board. It requires the Health Professions Bureau to randomly audit advanced practice nurse practice agreements and sets forth parameters of the audit. It also changes the quorum requirements for the State Board of Nursing. The bill provides that a license to practice podiatric medicine expires every two years.

Effective Date: July 1, 2003.

Explanation of State Expenditures: (Revised) *Criminal History Record* - This bill exempts the Health Professions Bureau (HPB) from paying a fee to the State Police Department for requesting the release of a limited criminal history record. Because the HPB would access the records electronically, the State Police Department would not incur the same costs as it would for providing the information in hard copy form. However, by exempting the HPB from paying the criminal history record fee, the State Police Department would be losing revenue that the HPB would otherwise have paid for the hard copy record.

Administrative Law Judges - The HPB currently provides for administrative law judges (ALJ) to render final orders in health professions boards' hearings that include proceedings in relation to disciplinary sanctions.

This bill would add the cost of providing an ALJ to the list of costs that are covered by the person subject to the disciplinary sanctions. In FY 2002, the HPB spent approximately \$12,000 to provide ALJs. So far in FY 2003, the HPB has spent \$9,500 and estimates it will spend between \$18,000 and \$20,000 on ALJs by the end of the fiscal year. This provision would reduce expenditures for the HPB by up to \$20,000, based on the estimated cost of providing ALJs.

Advance Practice Nurse Audits - This provision requires the HPB to randomly audit between 1% and 10% of the practice agreements of advanced practice nurses who have prescriptive authority. Because the size of the population to be sampled consists of approximately 1,330 nurses, the sample size can be anywhere between 13 and 133 nurses.

To implement an audit, the HPB would need to do the following: create a random audit list, notify the selected practitioners by certified mail, review the practice agreements, and send follow-up correspondence to those who are either in or out of compliance. The HPB expects the fiscal impact of this provision to be minimal due to the small sample size.

Explanation of State Revenues: *Podiatric Medicine License Renewal* - Currently, professionals licensed to practice podiatric medicine must renew their license every four years and pay a \$30 fee. This bill would require the license to be renewed every two years, instead of four years. The HPB reported in October 2002 that 397 professionals held a license to practice podiatric medicine. If each of the licensees renewed their license every two years instead of four years, the HPB would experience an increase in revenue of \$11,910 every four years. Currently, the licenses are set to renew by June 30, 2005, so the additional revenue will first begin in FY 2007.

Explanation of Local Expenditures:

Explanation of Local Revenues:

State Agencies Affected: Health Professions Bureau.

Local Agencies Affected:

Information Sources: Matt Hopper, Health Professions Bureau, (317) 234-1985.

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